

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214544096		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: NATIONAL ENERGY EDUCATION DEVELOPMENT PROJECT</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: MARY E SPRUILL 8408 KAO CIR MANASSAS, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: MANASSAS CITY (FILED IN PRINCE WILLIAM COUNTY)</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 11/30/2014</p> <p>SCC ID NO: 03840501</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED
CLASS	AUTHORIZED			
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 8408 KAO CIRCLE</p> <p style="margin-left: 40px;">CITY/ST/ZIP: MANASSAS, VA 20110</p>				
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>				
NAME: RANDALL LUTHI TITLE: TREASURER ADDRESS: P.O. BOX 10101 CITY/ST/ZIP/CO: MANASSAS, VA 20108	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR		
NAME: MARGARET DOWNY TITLE: VICE CHAIRMAN ADDRESS: 3145 MAIN STREET CITY/ST/ZIP/CO: BARNSTABLE, MA 02630	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR		
NAME: KRISTY MONK TITLE: SECRETARY ADDRESS: P.O. BOX 10101 CITY/ST/ZIP/CO: MANASSAS, VA 20108	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR		
NAME: WENDY WIEDENBECK TITLE: CHAIRMAN ADDRESS: P.O. BOX 10101 CITY/ST/ZIP/CO: MANASSAS, VA 20108	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR		
NAME: MARY E SPRUILL TITLE: EX D ADDRESS: 8408 KAO CIRCLE CITY/ST/ZIP/CO: MANASSAS, VA 20110	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR		
NAME: GUY CARUSO TITLE: DIRECTOR ADDRESS: P O BOX 10101 CITY/ST/ZIP/CO: MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KRISTI DESJARLAIS DIRECTOR P.O. BOX 10101 MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DIANE LEAR DIRECTOR P.O. BOX 10101 MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LINDA LUNG DIRECTOR P.O. BOX 10101 MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATE MARKS DIRECTOR P.O. BOX 10101 MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL PERNA DIRECTOR P.O. BOX 10101 MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BARRY RUSSELL DIRECTOR P.O. BOX 10101 MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AL RYAN DIRECTOR P.O. BOX 10101 MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WAYNE YONKELOWITZ DIRECTOR P.O. BOX 10101 MANASSAS, VA 20108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ MARY E SPRUILL SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MARY E SPRUILL, EX D PRINTED NAME AND CORPORATE TITLE	9/23/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			